AN AMENDMENT TO THE ZONING MAP OF THE CITY OF SALISBURY, NC

Applicant:					
11	Name				
	Address				
	Phone Number				
Tax Map Nu	amber(s) & Parcel Number(s) of Property(ies) requested for Rezoning:				
Size of prope	erty (ies) in acres or ft ² :				
Number of lo	ots in requested area:				
Existing Zon	ning District:				
Proposed Zo	oning District:				
Planning Bossuitability of use or devel	al to change the zoning classification is made with the understanding that ard and City Council consideration of a zoning change is to be based on the the above are for the zoning classification proposed and not for any singular lopment placed thereon. The applicant may, but is not required to, give a equesting the proposed district:				
					

The following are all of the persons, firms, or corporations owning property:

- (a) Within the area proposed for zoning change;
- (b) Adjacent to and within 100 feet of both sides and rear of the property of the proposed zoning change and directly across the street from the property of the proposed zoning change.

Tax Map	Parcel	Name of Property Ow	<u>ner</u>	Mailing Address as shown on Rowan County tax records)	
<u>(a)</u>					
(b)					
		(Use additional s	sheets if necessary)		
All information furnished herein is true and factual information concerning this proposal.				ing notification sign concerning this be placed on this property (these	
Name		Date	Name	Date	
Address			Address		
Phone	£:1: £		Phone	the since is in filled unish the City of	

A filing fee must accompany each proposed zoning map amendment at the time it is filed with the City of Salisbury.

A copy of a county tax map (maps) which shows subject property and other surrounding properties must accompany this proposal. The property for which a zoning change is proposed must be clearly indicated on the tax map. (Tax maps may be obtained at the Rowan County Tax Assessor's Office.)